REPORT DOCUMENTATION PAGE

Form Approved
OMB No. 0704-0188

AD-A212 937

REPORT DATE	3. REPORT TYPE AND DATES COVERED
July 1989	

4. TITLE AND SUBTITLE
DRMS Total Quality Management (TQM) Implementation Plan

5. FUNDING NUMBERS

6. AUTHOR(S)

7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES)
Defense Reutilization and Marketing Service (DRMS)
Battle Creek, MI

8. PERFORMING ORGANIZATION REPORT NUMBER

9. SPONSORING/MONITORING AGENCY NAME(S) AND ADDRESS(ES)

10. SPONSORING/MONITORING AGENCY REPORT NUMBER

11. SUPPLEMENTARY NOTES

12a. DISTRIBUTION/AVAILABILITY STATEMENT
Approved for Public Release; Distribution is Unlimited.

12b. DISTRIBUTION CODE

13. ABSTRACT *(Maximum 200 words)*

This document discusses the implementation of TQM at DRMS. The purpose of the plan is to provide a structured method to achieve the DRMS vision of pursuing continuous improvement in service provided to the Armed Forces and the public. The document includes guiding principles, goals and guidelines to problem solving.

SEP 29 1989

14. SUBJECT TERMS
TQM (Total Quality Management), Continuous Process Improvement, Management

15. NUMBER OF PAGES

16. PRICE CODE

17. SECURITY CLASSIFICATION OF REPORT	18. SECURITY CLASSIFICATION OF THIS PAGE	19. SECURITY CLASSIFICATION OF ABSTRACT	20. LIMITATION OF ABSTRACT
UNCLASSIFIED	UNCLASSIFIED	UNCLASSIFIED	UL

DRMS TOTAL QUALITY MANAGEMENT (TQM) IMPLEMENTATION PLAN

PURPOSE

The purpose of this plan is to provide a structured program enabling DRMS to achieve our vision of working together, pursuing continuous improvement, quality and economy in our service to the armed forces and the public.

The HQ DRMS TQM structure consists of a TQM Council, chaired by the DRMS Commander, with full-time membership consisting of the directors from DRMS-C, DRMS-H, DRMS-K, DRMS-L, DRMS-M and DRMS-O. The remaining directorates/offices will participate as required. The Council is further assisted by the TQM support staff, DRMS-CO.

For additional information on the TQM program at DRMS, refer to the DRMS Regulation No. 5025.9, Total Quality Management (copy attached). This regulation contains specific policy, definitions, assignment of responsibilities, reporting requirements and problem solving techniques.

DEFINITION

Total Quality Management is a leadership philosophy which creates a working environment that promotes teamwork and continuous improvement

PRINCIPLES

In order to create this environment, management will consider the following principles when making decisions or taking action:

- o   Change the Culture - A Way of Life

- o   Commit Fully to our Vision

- o   Know and Satisfy our Customer's Needs

- o   Delegate Responsibility and Authority - Accept Accountability

- o   Give Everyone a Stake in the Outcome

- o   Set Goals, Measure Progress and Recognize Accomplishments

- o   Create an Enhanced and Enriched Environment

- o   Create a Climate of Pride, Professionalism, Excellence and Trust

- o   Strive for Continuous Improvement - Make it Better

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IMPLEMENTATION PLAN

In order to change our culture, we will pursue the following course of action:

1. Foster Understanding and Commitment

2. Identify Supplier's and Customer's Requirements

3. Develop a Business Strategy

4. Identify Processes and Ownership

5. Prioritize Processes and Assign Responsibility for Improvement Review

6. Analyze Processes for Quality Improvements

7. Implement Process Quality Improvements

8   Evaluate Results

9. Repeat Cycle Starting at Step 2

As TQM is not just a 'buzzword' but rather a 'way of life,' DRMS will have established a continuous process improvement cycle once our plan is fully implemented at all levels of the agency.

GOALS

Our core goals are:

o   Know our customer's needs and assist them in realizing them

o   Commit fully to our vision

o   Achieve an environment of total quality in everything we do

o   Enhance the personal and professional development of our people

o   Use the continuous process improvement cycle (plan, do, check, act)

In order to achieve these goals we will begin by concentrating our efforts in six areas:

o   BUSINESS STRATEGY - develop a clear, functional business strategy for each mission area.

o   PERSONNEL DEVELOPMENT - Develop a focused training program and career cadre to assure a well-trained work force and broadened career opportunity.

o   FACILITY IMPROVEMENT - Pursue an aggressive program to improve quality of worklife, working conditions, warehouses and personnel support facilities.

o   AUTOMATION and MODERNIZATION - Pursue a total modernization effort to upgrade obsolete ADP systems and provide necessary equipment to function efficiently.

o   PROCESS IMPROVEMENTS - Establish Process Action Teams (PATs) to review and enhance operating procedures and work towards continuous improvement of DRMS processes and work practices.

o   QUALITY CONTROL - Establish a business review process to examine services and products to assure continuing improvement and maintenance of high quality service to customers worldwide.

EDUCATION

The heart of our effort is the continuous process improvement cycle and education is required to crystallize this cycle into the work force. In order to assure successful implementation of TQM at DRMS, we will begin the education process by providing orientation on TQM to our top-level management then filter down through management to the staff. To further enhance our staff's mind set, we will provide the Investment in Excellence (IIE) Program endorsed by DLA. This training will be available to the entire DRMS workforce. Additional training on TQM and problem solving techniques will be provided to TQM facilitators, Process Action Team leaders/members and other personnel as needed.

We will spread our vision and principles at Commander's Calls, Commanders Management Reviews (CMRs) and Workshops (Operations, Reutilization, Precious Metals, Environmental and Marketing). In addition, we will strive to incorporate them into all briefings and speeches.

CONTINUOUS PROCESS IMPROVEMENT

In order to begin the Continuous Process Improvement cycle, each directorate/office is currently identifying the work processes in its area. To aid in the identification process, we are reviewing the Business Area Analysis report, DAISY Functional Descriptions and the Assessable Units identified in the Internal Management Control Program. Once identified, the processes will be prioritized and responsibility fixed for improvement review.

In order to facilitate the process improvement cycle, Process Action Teams (PATs) will be established to review the work processes and recommend improvements at all levels of DRMS. Processes spanning more than one functional area will be reviewed by PATs containing members from all affected areas. The PAT leader will be from the directorate that 'owns' the process as it will have the ultimate responsibility for improving the process.

Again, education is necessary to train our staff in problem solving techniques. We will include the PAT leaders in the earliest available training.

RECOGNITION AND AWARDS

Providing recognition is vital to encourage the on-going success of our efforts. DRMS will recognize and reward all individuals and groups that make recommendations resulting in process improvements at any and all levels of DRMS. Depending on the type and degree of improvement, recognition and rewards will range from certificates to monetary awards.

In addition to the improvement awards, DRMS will recognize the DRMO which best exemplifies the execution of its mission responsibilities. We have developed a statistical quality control system which will measure the business processes statistically and identify the winner each year.

Publicity for award recipients, individual and group, will be provided in DRMS publications. This will allow us to share process improvements throughout the agency.

ACCOMPLISHMENTS

Implementing TQM throughout the agency is a lengthy process. A summary of DRMS accomplishments, to date, is as follows:

Feb 89   TQM Council established, support staff designated (DRMS-CO)

Apr 89   DRMS TQM strategic objectives and elements distributed

May 89   DRMS Commander attends Defense Systems Management College TQM Workshop

May 89   DRMS Total Quality Management Regulation No. 5025.9 published and distributed

Jun 89   DRMS Commander provides TQM orientation briefing to all directors and deputies

Jun 89   DRMS supervisors attend TQM training

Jun 89   Memory Jogger, a problem solving guide, distributed to all HQ DRMS and region staff, and each branch at the DRMOs

Jun 89   DRMS Implementation Plan completed and distributed

TOTAL QUALITY MANAGEMENT

I. **PURPOSE AND SCOPE.** To establish the Total Quality Management (TQM) process at DRMS.

II. **POLICY.** TQM is a strategy to seek continuous improvement in all DRMS processes providing services and products. Emphasis is on improvement initiatives that are customer oriented, improved quality, and improved responsiveness and overall economy of operations. All managers and employees will actively participate in the TQM process.

III. **DEFINITIONS**

  A. Elements of TQM at DRMS are:

    1. A business strategy for all organizations and functional areas.

    2. An active program of personnel development.

    3. Facility improvements to enhance working conditions.

    4. Automation and modernization initiatives.

    5. Continuous process improvements developed by Process Action Teams (PATs).

    6. Quality control indicators to evaluate and identify areas for improvement.

  B. Process Action Team (PAT). A team comprised of knowledgeable individuals seeking ways to improve processes in mission related areas. PATS will be used to examine, identify, prioritize and recommend continuous improvements in DRMS work processes. The team composition may be from one function, cross functional lines, or be from various organizational levels. Participation on the team may be on a voluntary basis or by management assignment.

  C. Statistical Quality Control (SQC). Comparative evaluation of key indicators to identify out-of-tolerance conditions.

IV. RESPONSIBILITIES

  A. DRMS Commander will:

    1. Implement TQM at DRMS.

    2. Serve as the chairman of the TQM council.

  B. DRMS Comptroller (DRMS-C) will:

    1. Serve as the productivity principal.

    2. Administer the TQM effort and oversee the implementation/operation of the DRMS PAT method.

    3. Designate the TQM council (DRMS-C/M/H/O).

    4. Periodically review TQM efforts to assess effectiveness.

  C. DRMS-CO will:

    1. Serve as TQM coordinator to administer this effort.

    2. Serve as TQM advocate.

    3. Serve as the DRMS facilitator and point of contact for the PAT method.

    4. Provide PAT status reports to the TQM council and higher headquarters.

    5. Plan and coordinate PAT training as required.

    6. Record savings from PAT generated MIPs/proposals (tangible/intangible).

    7. Serve as the DRMS point of contact for the DLA Integrated Data Base for Efficiency Achievement System (IDEAS); responsible for system interface.

    8. Maintain this regulation in a current status and review annually.

  D. DRMS TQM Council will:

    1. Advise DRMS Commander.

    2. Establish broad DRMS TQM goals and priorities for the corporate business strategy.

    3. Provide guidance and direction for TQM implementation.

4. Review SQC findings and take appropriate action.

5. Review results of implemented PAT recommendations.

E. The Heads of HQ DRMS Directorates/Offices will:

1. Develop program business strategies for TQM.

2. Review applicable processes, procedures and resource utilization for improvement opportunities.

3. Review directives to eliminate barriers to success that may be internally or externally imposed.

4. Identify, measure and evaluate performance indicators including upper and lower control limits.

5. Utilize PATs to identify and resolve process problems.

6. Designate PAT team leader/members as required.

7. Assist PATs upon request.

8. Evaluate PAT MIPs/proposals recommending approval/disapproval and submit a copy to DRMS-CO.

F. The DRMS Region Commanders will:

1. Develop an operational business strategy, including tangible objectives and priorities.

2. Implement SQC measurements to measure and evaluate particular strategies, workflow or performance.

3. Document and communicate improvements.

4. Oversee, monitor and assist DRMOs in the TQM effort.

5. Review and recommend all processes relating to internal functions, procedures, policies, Quality of Worklife (QOWL) and supporting system (control, information, communication) improvements at the DRMR/DRMO level to the DRMS functional manager with a copy to DRMS-CO.

6. Stimulate employee involvement in the PAT method.

7. Designate a PAT facilitator who will:

a. Serve as the point of contact for the region on all PAT issues.

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b.   Track status of PAT efforts within region.

c.   Provide a quarterly summation of the PAT monthly status reports to DRMS-CO by the 25th of the month following each quarter.

d.   Maintain a file on all PAT recommendations for annual reporting purposes.

8.   Designate PAT team leader/members as required at the DRMR and DRMO levels.

9.   Evaluate, approve/disapprove and authorize implementation of PAT, MIPs under their jurisdiction.

G.   The DRMO Chiefs will:

1.   Review and recommend process, procedure and resource utilization improvements to the DRMR.

2.   Request QOWL improvements in accordance with DRMS-R 4275.1, Facility Improvement Programs.

3.   Review DRMO SQC indicators to take appropriate action.

4.   Demonstrate management commitment by establishing and utilizing the PAT method and encouraging participation.

5.   Utilize PATs to enhance productivity by rapid identification and correction of problems.

6.   Designate PAT team leader/members as appropriate.

7.   Assist PATs upon request.

8.   Evaluate, approve/disapprove and authorize implementation of PAT recommendations within their jurisdiction.

9.   Submit PAT team recommendations via the Model Installation Program (MIP).

H.   PAT Team will:

1.   Meet on a weekly basis (1 hour minimum) for group discussion and problem solving.

2.   Submit monthly status reports on PAT actions by the 15th of each month:

a.   DRMO/DRMR PATs submit to DRMR facilitator.

b.   HQ DRMS PATs submit to DRMS facilitator (DRMS-CO)

3. Analyze data relative to the process under review. (See enclosure 1 for additional information.)

4. Submit improvement proposals to the next higher headquarters in accordance with DRMS-R 4001.1, DRMS Model Installation Program Guidelines and Procedures, with courtesy copies to DRMS-CO (DRMR/DRMO PATs).

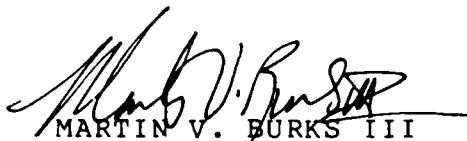5. Disband after submission of final report.

6. Begin a new Process Action Team wherever the need for improvement is apparent.

V. FORMS AND REPORTS. The monthly status report will contain the following information:

A. Date of submittal.

B. Names of team leader and members.

C. Designated point of contact, telephone number.

D. Description of process under review.

E. Start date of PAT effort.

F. Current status.

G. Projected completion date.

H. Number of MIPs submitted.

I. Number of MIPs approved.

BY ORDER OF THE COMMANDER:

1 Encl

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GUIDELINES TO PROBLEM SOLVING

Problem solving is a systematic approach used to examine a process to determine if problems do exist, the magnitude of the problems and the possible causes. This approach facilitates problem resolution and ultimately results in process improvement. The use of problem solving tools helps us analyze data pertaining to events that have already occurred and to understand the processes that helped to shape those events. The steps listed below are offered as a guideline to follow when initiating the problem solving process:

1. Identify the specific process under study.

2. Develop a <u>flow</u> <u>chart</u>, identifying all steps a process actually fo_lows.

3. Identify all interfaces with internal (other offices) and/or external customers.

4. Identify basic requirements:

   a. Customer requirements (internal/external).

   b. Documented requirements (regulatory, standard operating procedures).

   c. Determine which requirements are primary and secondary.

   d. Identify any self-imposed requirements or assumed work.

5. Perform data collection to verify and determine magnitude of problems.

   a. Determine measurement points within the process.

   b. Determine method of data collection (e.g., <u>check</u> <u>sheets</u>).

   c. Conduct measurements over a predetermined period of time (i.e., daily, weekly, monthly).

6. Analyze data to determine:

   a. Type of problems.

   b. Frequency of occurrence and/or magnitude of impact of all identified problems (in descending order using a <u>bar</u> <u>chart</u>).

    c. The frequency of occurence over a period of time for each problem type (<u>run</u> <u>chart</u>).

    d. Possible causes of a problem (<u>cause</u> <u>and</u> <u>effect</u> <u>diagram</u>).

    7. Develop and prioritize recommendations based on the findings.

    8. Submit recommendations in accordance with paragraph IVH4.

    9. Upon authorization, implement approved recommendations.

    10. Monitor effectiveness of implemented recommendations by applying previously used data collection methods.

    11. Periodically review improved process for further improvements.